

2/8/05

## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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FEB 08 2005

In re Application of : Marc LAMIREY  
Serial no. : 10/602,778  
Filed : June 24, 2003  
For : MULTI-CONTACT CONNECTOR FOR ELECTRODE  
Group Art Unit : FOR EXAMPLE FOR MEDICAL USE  
Examiner : 2833  
Docket : Gary F. PAUMEN  
NITROF P55AUS

The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT AFTER ALLOWANCE UNDER 37 CFR 1.312(a)  
AND CHANGE OF CORRESPONDENCE ADDRESS**

Dear Sir:

**[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS AMENDMENT.**

The Applicant respectfully requests entry of the following amendment in the above identified application.

**In the Claims:**

Please amend claim 19 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.

**TRANSMITTAL  
FORM**

*(to be used for all correspondence after initial filing)*

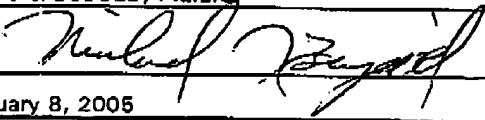
		Application Number	10/602,778
		Filing Date	June 24, 2003
		First Named Inventor	Mark LAMIREY
		Group Art Unit	2833
		Examiner Name	Gary F. PAUMEN
Total No. of Pages in this Submission: 8		Attorney Docket Number	NITROF P55AUS

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment After Allowance <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Petition <input checked="" type="checkbox"/> Power of Attorney, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
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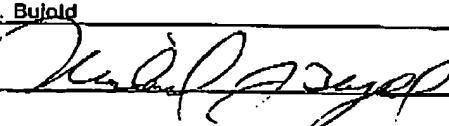
## REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	February 8, 2005	

## CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the USPTO on February 8, 2005

Type or printed name	Michael J. Bujold
Signature	
Date: February 8, 2005	